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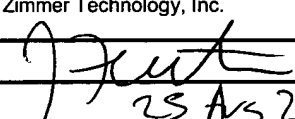
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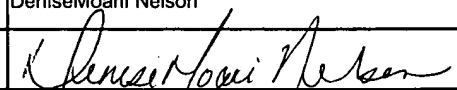
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/053,931
	Filing Date	January 22, 2002
	First Named Inventor	Dana C. Mears
	Art Unit	3732
	Examiner Name	Michael B. Priddy
Total Number of Pages in This Submission	Attorney Docket Number	ZM0414DIV1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Jonathan D. Feuchtwang, Reg. No. 41,017 Zimmer Technology, Inc.
Signature	
Date	25 Aug 2004

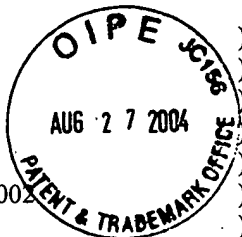
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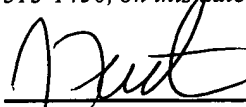
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Mears et al
Serial No.: 10/053,931
Filed: January 22, 2002
For: METHOD AND APPARATUS FOR
PERFORMING A MINIMALLY
INVASIVE TOTAL HIP
ARTHROPLASTY
Art Unit: 3732
Examiner: Michael B. Priddy



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August 25, 20, 2004
Date


Attorney for Applicants
Registration No. 41,017

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This IDS is submitted under 37 C.F.R. §1.97(c), after the C.F.R. §1.97(b) time period, but before the mail date of a Final Office Action or a Notice of Allowance (whichever occurs first), with either:

- (a) a statement under 37 C.F.R. §1.97(e); or
- (b) the \$180.00 fee under 37 C.F.R. §1.17(p).

Applicant(s) submit herewith Form PTO-1449 (Information Disclosure Citation) together with copies of patents, publications or other information of which applicant n(s) are aware, which applicant(s) believe may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 C.F.R. §1.56. Applicant(s) respectfully submit that the citation of any reference on Form PTO-1449 does not constitute an admission that the reference qualifies as prior art.

It is requested that the information disclosed on the enclosed Form PTO-1449 be made of record in this application.

(X) Statement Under 37 C.F.R. §1.97(e):

(X) The enclosed references were cited in a Communication issued by the European Patent Office (copy enclosed). Applicant(s) hereby certify(ies) that each item of information cited on the enclosed Form PTO-1449 was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three (3) months prior to the filing of this Information Disclosure Statement.

(X) Applicant(s) hereby certify(ies) that no item of information cited on the enclosed Form PTO-1449 was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing below after making reasonable inquiry, no item of information cited on the enclosed Form PTO-1449 was known to any individual designated in §1.56(c) more than three months prior to the filing of this Information Disclosure Statement.


() Enclosed is a check for \$180.00 to cover the fee as set forth in 37 C.F.R. § 1.17(p).

The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or to credit any overpayment, to Deposit Account No. 50-2779. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

150 North Wacker Drive – Suite 1200
Chicago, Illinois 60606
Telephone: (312) 372-2859
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Customer No. 37235

ZIMMER TECHNOLOGY, INC.

By: 
Jonathan D. Feuchtwang, Reg. No. 41, 017

